

# Work Order ID 61576

Monday, August 30, 2010 11:58:30 AM

BLUE



Page 1

Item ID: D2933-2

Accept



Setup Start



Revision ID:

Stop



Item Name: Saddle RH In, 206

Start Date: 8/30/2010

Start Qty: 4.00



Cust Item ID:

Required Date: 9/9/2010

Req'd Qty: 4.00

Customer:

Reference:

Approvals:

Process Plan: MF

Date: 10-8-30

Tooling:

Date:

Run Start



QC:

Date:

SPC (Y/N):

Date:

Stop



Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

Draw Nbr

Revision Nbr

D2933

Rev C

190

Spray Painting per QSI005 4.2

0.00



SprayPaint

Memo

0.00

Spray Painting

PULL FROM STOCK D2933-2UP X 4

PRIME : B 110A1

PAINT DELFLEET BLUE : B 113171

CLEAR DELFLEET : B 11331A

ml 10 09 07 (2)

200

QC14- Inspect Spray Paint

0.00



QC

Memo

0.00

Quality Control

RT 10-07-08 (2)

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

**Work Order ID 61576**

Monday, August 30, 2010 11:58:30 AM



Page 2

Item ID: D2933-2

Accept



Setup Start



Revision ID:

Stop



Item Name: Saddle RH In, 206

Start Date: 8/30/2010 Start Qty: 4.00



Cust Item ID:

Required Date: 9/9/2010 Req'd Qty: 4.00

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start



QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop

Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

210

Identify as per dwg & Stock Location: *180*

0.00

Packaging

Memo

*421*

0.00

Packaging

*10/9/08* *(2)*

220



QC21- Final Inspection - Work Order Release

0.00

QC

Memo

0.00

Quality Control

*10/09/08**MF 10-9-08*

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Picklist Print

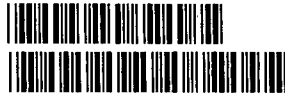
Monday, August 30, 2010 12:00:24 PM

Page 1

Work Order ID: 61576

Parent Item: D2933-2

Parent Item Name: Saddle RH In, 206



Start Date: 8/30/2010

Required Date: 9/9/2010

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP: B□00.06.26□New DWG rev (mpp 2069)□EC□  
IPP Rev:C As per Rev C 07-03-19 JLM □

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

D2933-2UP

Manufactured

No

Each

10.0000

4



206 Saddle Right-unpainted

RT 10-09-01

Location

Loc Qty

Loc Code

ST431

10

42887

10

X2

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries